



FIVE LAST ACTS – THE EXIT PATH (2ND EDITION)

*The arts and science of rational suicide in the
face of unbearable, unrelievable suffering*

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FIVE LAST ACTS

The Exit Path

*The arts and science of
rational suicide in the face of
unbearable, unrelievable
suffering*

being Five Last Acts III: Safe and dignified ways that
people use
to end their own lives when faced with
unbearable and unrelievable suffering, or to find the
courage to face an unknown future

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Foreword

to the first edition, by Professor David Donnison & Kay Carmichael

Readers in the pride of their youth may wonder why anyone would write a book about methods for killing oneself. Well, here's why.

A hundred years ago, when death approached, three-quarters of our people would be lying in their own beds, close relatives nearby, and visited occasionally by friends, a nurse or a doctor who could do little more than make the patient as comfortable as possible. Later, their bodies would be laid out and the neighbours would come to pay their last respects. Death was a domestic event; its timing decided by nature.

Today, three-quarters of us will die in hospitals or other institutions, surrounded by strangers and tended by people in white coats with the technology to keep us alive for long periods. Death has become – and will increasingly become – a medical event; its timing often decided by doctors.

Patients are increasingly demanding that their voices be heard when that decision is made. Armed with information from the Internet about the likely course of their diseases, supported by pressure groups speaking for the people who suffer from these diseases, and more prepared than their grandparents were to take legal action to enforce their rights, their voices are indeed more often heard. Doctors are less tempted to act as 'sage on the stage', seeing themselves more as 'guide on the side', helping patients to make their own decisions so far as nature permits.

Foreword

If you want your life prolonged as far as possible, the doctors can do their best for you. But if you ask them to help you bring it to a decent end you will run into all sorts of legal and professional obstacles. Assisting a suicide is a crime in the UK which may get professionals struck off. Middle-class patients, with doctors among their close friends and relatives, often get help in drawing things to a close. But too many people find themselves helpless victims of pain or humiliating dependence on strangers, watching their loved ones buckle under the burdens they unwillingly lay on them. Meanwhile many more fear this may become their fate.

So it's not surprising that, for years, every survey of the British has shown that large and growing majorities of our fellow citizens – now about 80 per cent – would support the legalisation of voluntary euthanasia in the kinds of cases most of us would regard as reasonable – subject to the safeguards that more civilised nations like the Dutch have worked out to protect us from unscrupulous relatives and people like Dr. Shipman.

But politicians, who were prepared to introduce family allowances, abolish the death penalty, take us into Europe and into the Iraq disaster – all widely opposed by many of their people – are not prepared to accept the views of this massive majority. That's probably because well-funded and strident spokesmen of some faith groups oppose such a reform; and because the dead and dying have no votes.

Stuck in this impasse, a small but growing number of courageous patients, their carers and doctors, are going to the courts to seek permission for one form or another of assisted suicide. Some succeed and some fail – but all have to go through a ghastly process in a public arena that was never

intended to deal with such complex, personal and painful issues. Eventually, one of the Parliaments or Assemblies of the United Kingdom will enable doctors to respond more humanely to patients approaching the end of their lives. Perhaps the Scottish Parliament, already innovative in so many ways, will give a lead?

The argument for a legal, civil right that enables people facing intolerable circumstances to gain professional help either to prolong life as far as possible or to bring it to an end has long been won. The opinion polls repeatedly show that. While we wait for our politicians to gain the courage to respond to that majority we are morally entitled to find an exit for ourselves in ways that are as secure, painless and dignified as possible.

For that, no-one is better equipped to help than Chris Docker who has won widespread respect for the work he has done on this question for over fifteen years. This book brings up to date his publications of earlier years for which many people have been grateful. Even if they never feel the need to use his advice, his readers will be better equipped to discuss in a relaxed and rational way the decisions that have to be taken towards the end of our lives.

David Donnison is Professor Emeritus in the University of Glasgow. He was Convener of the Voluntary Euthanasia Society of Scotland, and took a leading role in the biggest opinion survey on euthanasia yet made in Britain¹.

Dr. Kay Carmichael, writer, broadcaster and social worker, also played a leading part in the movement for legalising voluntary euthanasia.

¹Donnison D, Bryson C, Matters of Life and Death: Attitudes to Euthanasia, in: Jowell R, Curtice J et al (eds), British Social Attitudes 13th Report, Dartmouth 1996:161-183

Introduction

This Section includes general information about how this book is arranged, conventions used, and how to get the most out of it.

What you won't find in this book

Living wills. If you want to know about living wills (advance medical directives), please consult the relevant forms for your country. For a fuller understanding of living wills, see *Making Sense of Living Wills* by Nancy King (Kluwer Academic Publishers) or my own chapter on living wills in *Contemporary Issues in Law, Medicine and Ethics* (ed. Sheila AM McLean, Dartmouth Publishing). Exit also supplies a set of forms with detailed advice on joining (address at the back of this book).

Living wills are a big subject – too big for this book. And they are about refusing medical treatment. This book is about self-deliverance.

Neither will you find an offer to help you with an assisted suicide or to give you one-to-one advice on self-deliverance. This book is about empowering you. While I'd love to hear from you with ideas, life-stories and case reports – they can be invaluable – but information on self-deliverance is only provided here in this book, and from time to time in Exit workshops and their magazine. This is not a personal service or an emergency service.

The book can't possibly answer every conceivable question. But it aims to answer many, very many, that crop up. And also show you how to find answers.